

B1 (Official Form 1)(04/13)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>United States Bankruptcy Court</b><br><b>Northern District of Illinois</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Voluntary Petition</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Name of Debtor (if individual, enter Last, First, Middle):<br><b>Peppa, Amanda</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                 | Name of Joint Debtor (Spouse) (Last, First, Middle):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| All Other Names used by the Debtor in the last 8 years<br>(include married, maiden, and trade names):                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                 | All Other Names used by the Joint Debtor in the last 8 years<br>(include married, maiden, and trade names):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN<br>(if more than one, state all)<br><b>xxx-xx-1055</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                 | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN<br>(if more than one, state all)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Street Address of Debtor (No. and Street, City, and State):<br><b>28407 W. Kelsey Ct.</b><br><b>Barrington, IL</b><br><div style="text-align: right;">ZIP Code<br/><b>60010</b></div>                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                 | Street Address of Joint Debtor (No. and Street, City, and State):<br><div style="text-align: right;">ZIP Code</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| County of Residence or of the Principal Place of Business:<br><b>Lake</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                 | County of Residence or of the Principal Place of Business:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Mailing Address of Debtor (if different from street address):<br><div style="text-align: right;">ZIP Code</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                 | Mailing Address of Joint Debtor (if different from street address):<br><div style="text-align: right;">ZIP Code</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Location of Principal Assets of Business Debtor<br>(if different from street address above):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Type of Debtor</b><br>(Form of Organization) (Check one box)<br><input checked="" type="checkbox"/> Individual (includes Joint Debtors)<br><i>See Exhibit D on page 2 of this form.</i><br><input type="checkbox"/> Corporation (includes LLC and LLP)<br><input type="checkbox"/> Partnership<br><input type="checkbox"/> Other (If debtor is not one of the above entities,<br>check this box and state type of entity below.)                                                                                                                                                | <b>Nature of Business</b><br>(Check one box)<br><input type="checkbox"/> Health Care Business<br><input type="checkbox"/> Single Asset Real Estate as defined<br>in 11 U.S.C. § 101 (51B)<br><input type="checkbox"/> Railroad<br><input type="checkbox"/> Stockbroker<br><input type="checkbox"/> Commodity Broker<br><input type="checkbox"/> Clearing Bank<br><input type="checkbox"/> Other | <b>Chapter of Bankruptcy Code Under Which<br/>the Petition is Filed</b> (Check one box)<br><input checked="" type="checkbox"/> Chapter 7<br><input type="checkbox"/> Chapter 9<br><input type="checkbox"/> Chapter 11<br><input type="checkbox"/> Chapter 12<br><input type="checkbox"/> Chapter 13<br><input type="checkbox"/> Chapter 15 Petition for Recognition<br>of a Foreign Main Proceeding<br><input type="checkbox"/> Chapter 15 Petition for Recognition<br>of a Foreign Nonmain Proceeding                                                                                                                                                                                                                                                                                  |
| <b>Chapter 15 Debtors</b><br>Country of debtor's center of main interests:<br><br>Each country in which a foreign proceeding<br>by, regarding, or against debtor is pending:                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Tax-Exempt Entity</b><br>(Check box, if applicable)<br><input type="checkbox"/> Debtor is a tax-exempt organization<br>under Title 26 of the United States<br>Code (the Internal Revenue Code).                                                                                                                                                                                              | <b>Nature of Debts</b><br>(Check one box)<br><input checked="" type="checkbox"/> Debts are primarily consumer debts,<br>defined in 11 U.S.C. § 101(8) as<br>"incurred by an individual primarily for<br>a personal, family, or household purpose."<br><input type="checkbox"/> Debts are primarily<br>business debts.                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Filing Fee</b> (Check one box)<br><input checked="" type="checkbox"/> Full Filing Fee attached<br><input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must<br>attach signed application for the court's consideration certifying that the<br>debtor is unable to pay fee except in installments. Rule 1006(b). See Official<br>Form 3A.<br><input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must<br>attach signed application for the court's consideration. See Official Form 3B. |                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Chapter 11 Debtors</b><br>Check one box:<br><input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).<br><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).<br>Check if:<br><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates)<br>are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ).<br>Check all applicable boxes:<br><input type="checkbox"/> A plan is being filed with this petition.<br><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors,<br>in accordance with 11 U.S.C. § 1126(b). |
| <b>Statistical/Administrative Information</b><br><input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.<br><input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid,<br>there will be no funds available for distribution to unsecured creditors.                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                 | THIS SPACE IS FOR COURT USE ONLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>Estimated Number of Creditors</b><br><input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Estimated Assets</b><br><input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion                     |                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Estimated Liabilities</b><br><input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion                |                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

# Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):  
**Peppa, Amanda**

## All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

|                                          |              |             |
|------------------------------------------|--------------|-------------|
| Location<br>Where Filed: <b>- None -</b> | Case Number: | Date Filed: |
| Location<br>Where Filed:                 | Case Number: | Date Filed: |

## Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

|                                    |               |             |
|------------------------------------|---------------|-------------|
| Name of Debtor:<br><b>- None -</b> | Case Number:  | Date Filed: |
| District:                          | Relationship: | Judge:      |

### Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

### Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

**X /s/ Scott C. Polman** **January 19, 2015**  
Signature of Attorney for Debtor(s) (Date)  
**Scott C. Polman 6294565**

### Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

- ☐ Yes, and Exhibit C is attached and made a part of this petition.  
☒ No.

### Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

### Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  
☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  
☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

### Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and  
☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.  
☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

## Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):  
**Peppa, Amanda**

### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.  
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X   
Signature of Debtor **Amanda Peppa**

X \_\_\_\_\_  
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

**1-19-15**

#### Signature of Attorney\*

X \_\_\_\_\_  
Signature of Attorney for Debtor(s)

**Scott C. Polman 6294565**

Printed Name of Attorney for Debtor(s)

**Law Office of Scott C. Polman**

Firm Name

**8130 N Milwaukee Ave  
Niles, IL 60714**

Address

Email: **spolman.law@comcast.net**

**(847) 292-1989 Fax: (847) 510-0581**

Telephone Number

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X \_\_\_\_\_  
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X \_\_\_\_\_  
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X \_\_\_\_\_

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Amanda Peppia**

Debtor(s)

Case No.  
Chapter

**7**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor:

  
Amanda Peppas

Date:

1-19-15

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Amanda Peppia**,  
Debtor

Case No. \_\_\_\_\_

Chapter **7**

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE                                                                   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS           | LIABILITIES      | OTHER           |
|------------------------------------------------------------------------------------|----------------------|------------------|------------------|------------------|-----------------|
| A - Real Property                                                                  | <b>Yes</b>           | <b>1</b>         | <b>0.00</b>      |                  |                 |
| B - Personal Property                                                              | <b>Yes</b>           | <b>3</b>         | <b>15,607.78</b> |                  |                 |
| C - Property Claimed as Exempt                                                     | <b>Yes</b>           | <b>1</b>         |                  |                  |                 |
| D - Creditors Holding Secured Claims                                               | <b>Yes</b>           | <b>1</b>         |                  | <b>0.00</b>      |                 |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | <b>Yes</b>           | <b>1</b>         |                  | <b>0.00</b>      |                 |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | <b>Yes</b>           | <b>3</b>         |                  | <b>19,287.19</b> |                 |
| G - Executory Contracts and<br>Unexpired Leases                                    | <b>Yes</b>           | <b>1</b>         |                  |                  |                 |
| H - Codebtors                                                                      | <b>Yes</b>           | <b>1</b>         |                  |                  |                 |
| I - Current Income of Individual<br>Debtor(s)                                      | <b>Yes</b>           | <b>2</b>         |                  |                  | <b>2,541.57</b> |
| J - Current Expenditures of Individual<br>Debtor(s)                                | <b>Yes</b>           | <b>2</b>         |                  |                  | <b>2,566.92</b> |
| Total Number of Sheets of ALL Schedules                                            |                      | <b>16</b>        |                  |                  |                 |
| Total Assets                                                                       |                      |                  | <b>15,607.78</b> |                  |                 |
| Total Liabilities                                                                  |                      |                  |                  | <b>19,287.19</b> |                 |

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Amanda Peppia**,  
Debtor

Case No. \_\_\_\_\_

Chapter **7**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

| Type of Liability                                                                                                   | Amount          |
|---------------------------------------------------------------------------------------------------------------------|-----------------|
| Domestic Support Obligations (from Schedule E)                                                                      | <b>0.00</b>     |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)                                          | <b>0.00</b>     |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | <b>0.00</b>     |
| Student Loan Obligations (from Schedule F)                                                                          | <b>3,819.00</b> |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | <b>0.00</b>     |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | <b>0.00</b>     |
| TOTAL                                                                                                               | <b>3,819.00</b> |

**State the following:**

|                                                                                                 |                 |
|-------------------------------------------------------------------------------------------------|-----------------|
| Average Income (from Schedule I, Line 12)                                                       | <b>2,541.57</b> |
| Average Expenses (from Schedule J, Line 22)                                                     | <b>2,566.92</b> |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14 ) | <b>3,631.85</b> |

**State the following:**

|                                                                            |             |                  |
|----------------------------------------------------------------------------|-------------|------------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |             | <b>0.00</b>      |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | <b>0.00</b> |                  |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |             | <b>0.00</b>      |
| 4. Total from Schedule F                                                   |             | <b>19,287.19</b> |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |             | <b>19,287.19</b> |

In re Amanda Peppa, Debtor Case No. \_\_\_\_\_

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--------------------------------------|-----------------------------------------|------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------|
|--------------------------------------|-----------------------------------------|------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------|

None

|             |             |                      |
|-------------|-------------|----------------------|
| Sub-Total > | <b>0.00</b> | (Total of this page) |
| Total >     | <b>0.00</b> |                      |

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property



In re **Amanda Peppa**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

| Type of Property                                                                                                                                                                                                             | N<br>O<br>N<br>E | Description and Location of Property                                                                                                 | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 1. Cash on hand                                                                                                                                                                                                              | <b>X</b>         |                                                                                                                                      |                                             |                                                                                                           |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. |                  | <b>Barrington Credit Union savings account</b>                                                                                       | -                                           | <b>125.00</b>                                                                                             |
|                                                                                                                                                                                                                              |                  | <b>Barrington Credit Union checking account</b>                                                                                      | -                                           | <b>500.00</b>                                                                                             |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.                                                                                                                                      | <b>X</b>         |                                                                                                                                      |                                             |                                                                                                           |
| 4. Household goods and furnishings, including audio, video, and computer equipment.                                                                                                                                          |                  | <b>Minimal household goods and furnishings including kindle (debtor lives with her Mother who owns the majority of the property)</b> | -                                           | <b>250.00</b>                                                                                             |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.                                                                                          | <b>X</b>         |                                                                                                                                      |                                             |                                                                                                           |
| 6. Wearing apparel.                                                                                                                                                                                                          |                  | <b>Normal clothing at used clothing store prices</b>                                                                                 | -                                           | <b>350.00</b>                                                                                             |
| 7. Furs and jewelry.                                                                                                                                                                                                         |                  | <b>Wedding rings and standard everyday wearing jewelry</b>                                                                           | -                                           | <b>2,500.00</b>                                                                                           |
| 8. Firearms and sports, photographic, and other hobby equipment.                                                                                                                                                             | <b>X</b>         |                                                                                                                                      |                                             |                                                                                                           |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.                                                                                                     | <b>X</b>         |                                                                                                                                      |                                             |                                                                                                           |
| 10. Annuities. Itemize and name each issuer.                                                                                                                                                                                 | <b>X</b>         |                                                                                                                                      |                                             |                                                                                                           |

Sub-Total > **3,725.00**  
(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

In re **Amanda Peppia**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property                                                                                                                                                                                                                                  | N<br>O<br>N<br>E | Description and Location of Property                                                                                                                                                                              | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | <b>X</b>         |                                                                                                                                                                                                                   |                                             |                                                                                                           |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.                                                                                                                                                   |                  | <b>Teacher's retirement account (not yet vested)</b>                                                                                                                                                              | -                                           | <b>Unknown</b>                                                                                            |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.                                                                                                                                                                   | <b>X</b>         |                                                                                                                                                                                                                   |                                             |                                                                                                           |
| 14. Interests in partnerships or joint ventures. Itemize.                                                                                                                                                                                         | <b>X</b>         |                                                                                                                                                                                                                   |                                             |                                                                                                           |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments.                                                                                                                                                            | <b>X</b>         |                                                                                                                                                                                                                   |                                             |                                                                                                           |
| 16. Accounts receivable.                                                                                                                                                                                                                          | <b>X</b>         |                                                                                                                                                                                                                   |                                             |                                                                                                           |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.                                                                                                                          |                  | <b>Maintenance and support of \$1,432.78 monthly</b>                                                                                                                                                              | -                                           | <b>1,432.78</b>                                                                                           |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars.                                                                                                                                                                |                  | <b>Tax refund for tax year 2014 expected to be approximately \$6,500; tax return not yet filed</b>                                                                                                                | -                                           | <b>6,500.00</b>                                                                                           |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.                                                                            |                  | <b>Debtor has a contingent future interest in her Mother's revocable living trust. This contingent interest has no current value and only materializes upon the death of debtor's Mother, who is still living</b> | -                                           | <b>Unknown</b>                                                                                            |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.                                                                                                                          | <b>X</b>         |                                                                                                                                                                                                                   |                                             |                                                                                                           |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.                                                                      |                  | <b>Former spouse owes debtor approximately \$3,500 for tax reimbursement</b>                                                                                                                                      | -                                           | <b>3,500.00</b>                                                                                           |

Sub-Total > **11,432.78**  
(Total of this page)

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

In re **Amanda Peppia**, Debtor Case No. \_\_\_\_\_

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

| Type of Property                                                                                                                                                                                                                                                                            | N<br>O<br>N<br>E | Description and Location of Property               | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 22. Patents, copyrights, and other intellectual property. Give particulars.                                                                                                                                                                                                                 | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 23. Licenses, franchises, and other general intangibles. Give particulars.                                                                                                                                                                                                                  | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.                                                                                                                                                                                                                      |                  | <b>1998 Volvo with approximately 260,000 miles</b> | <b>-</b>                                    | <b>250.00</b>                                                                                             |
| 26. Boats, motors, and accessories.                                                                                                                                                                                                                                                         | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 27. Aircraft and accessories.                                                                                                                                                                                                                                                               | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 28. Office equipment, furnishings, and supplies.                                                                                                                                                                                                                                            | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 29. Machinery, fixtures, equipment, and supplies used in business.                                                                                                                                                                                                                          | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 30. Inventory.                                                                                                                                                                                                                                                                              | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 31. Animals.                                                                                                                                                                                                                                                                                |                  | <b>Pet cat and dog</b>                             | <b>-</b>                                    | <b>200.00</b>                                                                                             |
| 32. Crops - growing or harvested. Give particulars.                                                                                                                                                                                                                                         | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 33. Farming equipment and implements.                                                                                                                                                                                                                                                       | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 34. Farm supplies, chemicals, and feed.                                                                                                                                                                                                                                                     | <b>X</b>         |                                                    |                                             |                                                                                                           |
| 35. Other personal property of any kind not already listed. Itemize.                                                                                                                                                                                                                        | <b>X</b>         |                                                    |                                             |                                                                                                           |

Sub-Total > **450.00**  
(Total of this page)  
Total > **15,607.78**  
(Report also on Summary of Schedules)

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

In re **Amanda Peppia**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

| Description of Property                                                                                                                                                                                    | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------|-------------------------------------------------------|
| <b><u>Wearing Apparel</u></b>                                                                                                                                                                              |                                      |                            |                                                       |
| Normal clothing at used clothing store prices                                                                                                                                                              | 735 ILCS 5/12-1001(a)                | 350.00                     | 350.00                                                |
| <b><u>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</u></b>                                                                                                                     |                                      |                            |                                                       |
| Teacher's retirement account (not yet vested)                                                                                                                                                              | 735 ILCS 5/12-1001(b)                | 0.00                       | Unknown                                               |
| <b><u>Alimony, Maintenance, Support, and Property Settlements</u></b>                                                                                                                                      |                                      |                            |                                                       |
| Maintenance and support of \$1,432.78 monthly                                                                                                                                                              | 735 ILCS 5/12-1001(g)(4)             | 1,432.78                   | 1,432.78                                              |
| <b><u>Other Liquidated Debts Owing Debtor Including Tax Refund</u></b>                                                                                                                                     |                                      |                            |                                                       |
| Tax refund for tax year 2014 expected to be approximately \$6,500; tax return not yet filed                                                                                                                | 735 ILCS 5/12-1001(b)                | 4,000.00                   | 6,500.00                                              |
| <b><u>Equitable or Future Interests, Life Estates, etc.</u></b>                                                                                                                                            |                                      |                            |                                                       |
| Debtor has a contingent future interest in her Mother's revocable living trust. This contingent interest has no current value and only materializes upon the death of debtor's Mother, who is still living | 735 ILCS 5/2-1403                    | 0.00                       | Unknown                                               |
| <b><u>Other Contingent and Unliquidated Claims of Every Nature</u></b>                                                                                                                                     |                                      |                            |                                                       |
| Former spouse owes debtor approximately \$3,500 for tax reimbursement                                                                                                                                      | 735 ILCS 5/12-1001(g)(4)             | 3,500.00                   | 3,500.00                                              |
| <b><u>Automobiles, Trucks, Trailers, and Other Vehicles</u></b>                                                                                                                                            |                                      |                            |                                                       |
| 1998 Volvo with approximately 260,000 miles                                                                                                                                                                | 735 ILCS 5/12-1001(c)                | 250.00                     | 250.00                                                |

Total: **9,532.78** **12,032.78**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

B6D (Official Form 6D) (12/07)

In re Amanda Peppia, Debtor Case No. \_\_\_\_\_

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor" ,include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | H<br>U<br>S<br>B<br>A<br>N<br>D<br>W<br>I<br>F<br>E<br>J<br>O<br>I<br>N<br>T<br>C<br>O<br>M<br>M<br>U<br>N<br>I<br>T<br>Y | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND VALUE<br>OF PROPERTY<br>SUBJECT TO LIEN | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------|---------------------------------|
|                                                                                                                  |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
| Account No.                                                                                                      |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           | Value \$                                                                                                   |                                                |                                                          |                                      |                                                                      |                                 |
| Account No.                                                                                                      |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           | Value \$                                                                                                   |                                                |                                                          |                                      |                                                                      |                                 |
| Account No.                                                                                                      |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           | Value \$                                                                                                   |                                                |                                                          |                                      |                                                                      |                                 |
| Account No.                                                                                                      |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
|                                                                                                                  |                                      |                                                                                                                           | Value \$                                                                                                   |                                                |                                                          |                                      |                                                                      |                                 |
| Subtotal<br>(Total of this page)                                                                                 |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      |                                                                      |                                 |
| Total<br>(Report on Summary of Schedules)                                                                        |                                      |                                                                                                                           |                                                                                                            |                                                |                                                          |                                      | 0.00                                                                 | 0.00                            |

0 continuation sheets attached

In re **Amanda Peppia**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **Amanda Peppia**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                 | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-----------------|
|                                                                                                                                               |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                 |
| Account No. <b>unknown</b><br><br><b>Advocate Good Shepherd Hospital</b><br><b>450 West Hwy 22</b><br><b>Barrington, IL 60010</b>             | -                                    | <b>through 2014</b><br><b>health care services</b>                                                  |                                                |                                                          |                                      | <b>3,000.00</b> |
| Account No. <b>unknown</b><br><br><b>Derick Dermatology</b><br><b>1531 South Grove Ave</b><br><b>Suite 101</b><br><b>Barrington, IL 60010</b> | -                                    | <b>2010-11</b><br><b>health care services</b>                                                       |                                                |                                                          |                                      | <b>800.00</b>   |
| Account No. <b>xxxxxx5027</b><br><br><b>HealthLab</b><br><b>25 North Winfield Rd</b><br><b>Winfield, IL 60190</b>                             | -                                    | <b>June 2014</b><br><b>health care services</b>                                                     |                                                |                                                          |                                      | <b>163.92</b>   |
| Account No. <b>xxxxxx1234</b><br><br><b>LDC Collect</b><br><b>POB 52110</b><br><b>Phoenix, AZ 85072</b>                                       | -                                    | <b>health care services</b>                                                                         |                                                |                                                          |                                      | <b>291.00</b>   |
| Subtotal<br>(Total of this page)                                                                                                              |                                      |                                                                                                     |                                                |                                                          |                                      | <b>4,254.92</b> |

2 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re Amanda Peppia, Debtor Case No. \_\_\_\_\_

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | H<br>U<br>S<br>B<br>A<br>N<br>D<br>,<br>W<br>I<br>F<br>E<br>,<br>J<br>O<br>I<br>N<br>T<br>,<br>O<br>R<br>C<br>O<br>M<br>M<br>U<br>N<br>I<br>T<br>Y | Husband, Wife, Joint, or Community                    | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|---------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
| Account No. <b>xxxxxx6741</b>                                                                                 |                                      | -                                                                                                                                                  | <b>Opened 6/01/13<br/>health care services</b>        |                                                |                                                          |                                      | <b>70.00</b>                             |
| <b>Med Business Bureau<br/>POB 1219<br/>Park Ridge, IL 60068</b>                                              |                                      |                                                                                                                                                    |                                                       |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx5027</b>                                                                                 |                                      | -                                                                                                                                                  | <b>through 2014<br/>health care services</b>          |                                                |                                                          |                                      | <b>163.92</b>                            |
| <b>Nationwide Credit Collection<br/>815 Commerce Dr<br/>Suite 270<br/>Oak Brook, IL 60523-8852</b>            |                                      |                                                                                                                                                    |                                                       |                                                |                                                          |                                      |                                          |
| Account No.                                                                                                   |                                      |                                                                                                                                                    | <b>Representing:<br/>Nationwide Credit Collection</b> |                                                |                                                          |                                      | <b>Notice Only</b>                       |
| <b>Cadence Health<br/>25 N Winfield Rd<br/>Winfield, IL 60190</b>                                             |                                      |                                                                                                                                                    |                                                       |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx1957</b>                                                                                 |                                      | -                                                                                                                                                  | <b>through 2015<br/>health care services</b>          |                                                |                                                          |                                      | <b>45.66</b>                             |
| <b>Northwest Community Hospital<br/>25709 Network Place<br/>Chicago, IL 60673</b>                             |                                      |                                                                                                                                                    |                                                       |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx6263</b>                                                                                 |                                      | -                                                                                                                                                  | <b>2013<br/>health care services</b>                  |                                                |                                                          |                                      | <b>316.60</b>                            |
| <b>Novas Dohr &amp; Coll OB/GYN Assoc SC<br/>600 Hart Road<br/>Suite 310<br/>Barrington, IL 60010</b>         |                                      |                                                                                                                                                    |                                                       |                                                |                                                          |                                      |                                          |
| Sheet no. <u>1</u> of <u>2</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  |                                      |                                                                                                                                                    |                                                       |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                               |                                      |                                                                                                                                                    |                                                       |                                                |                                                          |                                      | <b>596.18</b>                            |



B6F (Official Form 6F) (12/07) - Cont.

In re Amanda Peppa, Debtor Case No. \_\_\_\_\_

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>B<br>O<br>R | H<br>U<br>S<br>B<br>A<br>N<br>D,<br>W<br>I<br>F<br>E,<br>J<br>O<br>I<br>N<br>T,<br>O<br>R<br>C<br>O<br>M<br>M<br>U<br>N<br>I<br>T<br>Y | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|---------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                               |                                 |                                                                                                                                        | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx5748</b>                                                                                 |                                 | -                                                                                                                                      | <b>Opened 11/01/13 Last Active 11/18/14<br/>educational</b>                                         |                                                |                                                          |                                      | <b>3,819.00</b>                          |
| <b>Nys Higher Ed Services<br/>99 Washington Ave<br/>Albany, NY 12210</b>                                      |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx1199</b>                                                                                 |                                 | -                                                                                                                                      | <b>Opened 12/17/98 Last Active 10/26/12<br/>educational</b>                                         |                                                |                                                          |                                      | <b>Unknown</b>                           |
| <b>Slm Financial Corp<br/>POB 9500<br/>Wilkes-barre, PA 18773</b>                                             |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No. <b>unknown</b>                                                                                    |                                 | -                                                                                                                                      | <b>through 2015<br/>legal services</b>                                                              |                                                |                                                          |                                      | <b>10,555.09</b>                         |
| <b>Susan E Kamman &amp; Associates<br/>33 E Main St<br/>Lake Zurich, IL 60047</b>                             |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx2114</b>                                                                                 |                                 | -                                                                                                                                      | <b>Opened 10/01/12 Last Active 4/24/13<br/>unknown</b>                                              |                                                |                                                          |                                      | <b>62.00</b>                             |
| <b>Unique National Collection<br/>119 E Maple St<br/>Jeffersonville, IN 47130</b>                             |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No.                                                                                                   |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      |                                          |
|                                                                                                               |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Sheet no. <u>2</u> of <u>2</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                               |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      | <b>14,436.09</b>                         |
| Total<br>(Report on Summary of Schedules)                                                                     |                                 |                                                                                                                                        |                                                                                                     |                                                |                                                          |                                      | <b>19,287.19</b>                         |

In re **Amanda Peppa**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,  
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.  
State whether lease is for nonresidential real property.  
State contract number of any government contract.

In re Amanda Peppia,  
Debtor

Case No. \_\_\_\_\_

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

\_\_\_\_\_ continuation sheets attached to Schedule of Codebtors

Fill in this information to identify your case:

Debtor 1 Amanda Peppa

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM/DD/YYYY

## Official Form B 6I

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☒ Employed
- ☐ Not employed

Special Services Assistant

Barrington Community School District 220

310 James St  
Barrington, IL 60010

8 years

Debtor 2 or non-filing spouse

- ☐ Employed
- ☐ Not employed

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|                                                                                                                                                      | For Debtor 1       | For Debtor 2 or non-filing spouse |
|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | \$ <u>1,826.12</u> | \$ <u>N/A</u>                     |
| 3. Estimate and list monthly overtime pay.                                                                                                           | +\$ <u>0.00</u>    | +\$ <u>N/A</u>                    |
| 4. Calculate gross income. Add line 2 + line 3.                                                                                                      | \$ <u>1,826.12</u> | \$ <u>N/A</u>                     |

Debtor 1 **Amanda Peppia**

Case number (if known)

|                                                                                                                                                                                                                                                                                                                                                                                                        | For Debtor 1           | For Debtor 2 or non-filing spouse |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------|
| Copy line 4 here                                                                                                                                                                                                                                                                                                                                                                                       | 4. \$ <b>1,826.12</b>  | \$ <b>N/A</b>                     |
| <b>5. List all payroll deductions:</b>                                                                                                                                                                                                                                                                                                                                                                 |                        |                                   |
| 5a. Tax, Medicare, and Social Security deductions                                                                                                                                                                                                                                                                                                                                                      | 5a. \$ <b>370.70</b>   | \$ <b>N/A</b>                     |
| 5b. Mandatory contributions for retirement plans                                                                                                                                                                                                                                                                                                                                                       | 5b. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 5c. Voluntary contributions for retirement plans                                                                                                                                                                                                                                                                                                                                                       | 5c. \$ <b>99.84</b>    | \$ <b>N/A</b>                     |
| 5d. Required repayments of retirement fund loans                                                                                                                                                                                                                                                                                                                                                       | 5d. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 5e. Insurance                                                                                                                                                                                                                                                                                                                                                                                          | 5e. \$ <b>246.79</b>   | \$ <b>N/A</b>                     |
| 5f. Domestic support obligations                                                                                                                                                                                                                                                                                                                                                                       | 5f. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 5g. Union dues                                                                                                                                                                                                                                                                                                                                                                                         | 5g. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 5h. Other deductions. Specify:                                                                                                                                                                                                                                                                                                                                                                         | 5h.+ \$ <b>0.00</b>    | + \$ <b>N/A</b>                   |
| <b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.                                                                                                                                                                                                                                                                                                                               | 6. \$ <b>717.33</b>    | \$ <b>N/A</b>                     |
| <b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.                                                                                                                                                                                                                                                                                                                          | 7. \$ <b>1,108.79</b>  | \$ <b>N/A</b>                     |
| <b>8. List all other income regularly received:</b>                                                                                                                                                                                                                                                                                                                                                    |                        |                                   |
| 8a. Net income from rental property and from operating a business, profession, or farm<br>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.                                                                                                                                                        | 8a. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 8b. Interest and dividends                                                                                                                                                                                                                                                                                                                                                                             | 8b. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive<br>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.                                                                                                                                                                                              | 8c. \$ <b>1,432.78</b> | \$ <b>N/A</b>                     |
| 8d. Unemployment compensation                                                                                                                                                                                                                                                                                                                                                                          | 8d. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 8e. Social Security                                                                                                                                                                                                                                                                                                                                                                                    | 8e. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 8f. Other government assistance that you regularly receive<br>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.<br>Specify:                                                                                                                       | 8f. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 8g. Pension or retirement income                                                                                                                                                                                                                                                                                                                                                                       | 8g. \$ <b>0.00</b>     | \$ <b>N/A</b>                     |
| 8h. Other monthly income. Specify:                                                                                                                                                                                                                                                                                                                                                                     | 8h.+ \$ <b>0.00</b>    | + \$ <b>N/A</b>                   |
| <b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.                                                                                                                                                                                                                                                                                                                                     | 9. \$ <b>1,432.78</b>  | \$ <b>N/A</b>                     |
| <b>10. Calculate monthly income.</b> Add line 7 + line 9.<br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.                                                                                                                                                                                                                                                                | 10. \$ <b>2,541.57</b> | \$ <b>N/A</b>                     |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b><br>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.<br>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .<br>Specify: | 11. +\$ <b>0.00</b>    |                                   |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies                                                                                                                                      | 12. \$ <b>2,541.57</b> | <b>Combined monthly income</b>    |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b>                                                                                                                                                                                                                                                                                                             |                        |                                   |
| <input checked="" type="checkbox"/> No.<br><input type="checkbox"/> Yes. Explain:                                                                                                                                                                                                                                                                                                                      |                        |                                   |

Fill in this information to identify your case:

Debtor 1 Amanda Peppia

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form B 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son

13

☐ No  
☒ Yes

Daughter

21

☐ No  
☒ Yes

Daughter

22

☐ No  
☒ Yes

☐ No  
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☐ No  
☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Amanda Peppia**

Case number (if known)

|                                                                                                                                                                                                                                                                                                                      |          |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------|
| <b>6. Utilities:</b>                                                                                                                                                                                                                                                                                                 |          |                 |
| 6a. Electricity, heat, natural gas                                                                                                                                                                                                                                                                                   | 6a. \$   | <b>0.00</b>     |
| 6b. Water, sewer, garbage collection                                                                                                                                                                                                                                                                                 | 6b. \$   | <b>0.00</b>     |
| 6c. Telephone, cell phone, Internet, satellite, and cable services                                                                                                                                                                                                                                                   | 6c. \$   | <b>333.00</b>   |
| 6d. Other. Specify: _____                                                                                                                                                                                                                                                                                            | 6d. \$   | <b>0.00</b>     |
| <b>7. Food and housekeeping supplies</b>                                                                                                                                                                                                                                                                             | 7. \$    | <b>775.00</b>   |
| <b>8. Childcare and children's education costs</b>                                                                                                                                                                                                                                                                   | 8. \$    | <b>175.00</b>   |
| <b>9. Clothing, laundry, and dry cleaning</b>                                                                                                                                                                                                                                                                        | 9. \$    | <b>150.00</b>   |
| <b>10. Personal care products and services</b>                                                                                                                                                                                                                                                                       | 10. \$   | <b>65.00</b>    |
| <b>11. Medical and dental expenses</b>                                                                                                                                                                                                                                                                               | 11. \$   | <b>175.00</b>   |
| <b>12. Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.                                                                                                                                                                                                              | 12. \$   | <b>325.00</b>   |
| <b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>                                                                                                                                                                                                                                        | 13. \$   | <b>75.00</b>    |
| <b>14. Charitable contributions and religious donations</b>                                                                                                                                                                                                                                                          | 14. \$   | <b>0.00</b>     |
| <b>15. Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.                                                                                                                                                                                                               |          |                 |
| 15a. Life insurance                                                                                                                                                                                                                                                                                                  | 15a. \$  | <b>0.00</b>     |
| 15b. Health insurance                                                                                                                                                                                                                                                                                                | 15b. \$  | <b>0.00</b>     |
| 15c. Vehicle insurance                                                                                                                                                                                                                                                                                               | 15c. \$  | <b>120.00</b>   |
| 15d. Other insurance. Specify: _____                                                                                                                                                                                                                                                                                 | 15d. \$  | <b>0.00</b>     |
| <b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: _____                                                                                                                                                                                                        | 16. \$   | <b>0.00</b>     |
| <b>17. Installment or lease payments:</b>                                                                                                                                                                                                                                                                            |          |                 |
| 17a. Car payments for Vehicle 1                                                                                                                                                                                                                                                                                      | 17a. \$  | <b>0.00</b>     |
| 17b. Car payments for Vehicle 2                                                                                                                                                                                                                                                                                      | 17b. \$  | <b>0.00</b>     |
| 17c. Other. Specify: _____                                                                                                                                                                                                                                                                                           | 17c. \$  | <b>0.00</b>     |
| 17d. Other. Specify: _____                                                                                                                                                                                                                                                                                           | 17d. \$  | <b>0.00</b>     |
| <b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</b>                                                                                                                                               | 18. \$   | <b>0.00</b>     |
| <b>19. Other payments you make to support others who do not live with you.</b><br>Specify: _____                                                                                                                                                                                                                     | \$       | <b>0.00</b>     |
| <b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>                                                                                                                                                                                                     |          |                 |
| 20a. Mortgages on other property                                                                                                                                                                                                                                                                                     | 20a. \$  | <b>0.00</b>     |
| 20b. Real estate taxes                                                                                                                                                                                                                                                                                               | 20b. \$  | <b>0.00</b>     |
| 20c. Property, homeowner's, or renter's insurance                                                                                                                                                                                                                                                                    | 20c. \$  | <b>0.00</b>     |
| 20d. Maintenance, repair, and upkeep expenses                                                                                                                                                                                                                                                                        | 20d. \$  | <b>25.00</b>    |
| 20e. Homeowner's association or condominium dues                                                                                                                                                                                                                                                                     | 20e. \$  | <b>0.00</b>     |
| <b>21. Other:</b> Specify: <b>Miscellaneous family expenses</b>                                                                                                                                                                                                                                                      | 21. +\$  | <b>75.00</b>    |
| <b>Pending wage garnishment</b>                                                                                                                                                                                                                                                                                      | +\$      | <b>273.92</b>   |
| <b>22. Your monthly expenses.</b> Add lines 4 through 21.<br>The result is your monthly expenses.                                                                                                                                                                                                                    | 22. \$   | <b>2,566.92</b> |
| <b>23. Calculate your monthly net income.</b>                                                                                                                                                                                                                                                                        |          |                 |
| 23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.                                                                                                                                                                                                                                           | 23a. \$  | <b>2,541.57</b> |
| 23b. Copy your monthly expenses from line 22 above.                                                                                                                                                                                                                                                                  | 23b. -\$ | <b>2,566.92</b> |
| 23c. Subtract your monthly expenses from your monthly income.<br>The result is your <i>monthly net income</i> .                                                                                                                                                                                                      | 23c. \$  | <b>-25.35</b>   |
| <b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b><br>For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |          |                 |
| <input type="checkbox"/> No.                                                                                                                                                                                                                                                                                         |          |                 |
| <input checked="" type="checkbox"/> Yes.                                                                                                                                                                                                                                                                             |          |                 |
| Explain: <div style="border: 1px solid black; padding: 5px; display: inline-block;"><b>Pending court ordered payment expected to be discharged</b></div>                                                                                                                                                             |          |                 |

**United States Bankruptcy Court**  
**Northern District of Illinois**In re Amanda Peppa

Debtor(s)

Case No.

Chapter

7**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 18 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date

1-19-15

Signature

**Amanda Peppa**

Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.



**United States Bankruptcy Court  
Northern District of Illinois**

In re **Amanda Peppia**

Debtor(s)

Case No.

Chapter

**7**

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

**1. Income from employment or operation of business**

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT  
**\$1,826.12**  
**\$21,000.00**  
**\$20,000.00**

SOURCE  
**2015 YTD: Debtor approximate employment income**  
**2014: Debtor approximate employment income**  
**2013: Debtor approximate employment income**

**2. Income other than from employment or operation of business**

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT  
**\$16,333.69**

SOURCE  
**2014 YTD: Debtor maintenance and support from former spouse**

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### 3. Payments to creditors

None ☒ **Complete a. or b., as appropriate, and c.**

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|------------------------------|-------------------|-------------|--------------------|
|------------------------------|-------------------|-------------|--------------------|

None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS/<br>TRANSFERS | AMOUNT PAID OR<br>VALUE OF<br>TRANSFERS | AMOUNT STILL OWING |
|------------------------------|---------------------------------|-----------------------------------------|--------------------|
|------------------------------|---------------------------------|-----------------------------------------|--------------------|

None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR AND<br>RELATIONSHIP TO DEBTOR | DATE OF PAYMENT | AMOUNT PAID | AMOUNT STILL OWING |
|------------------------------------------------------------|-----------------|-------------|--------------------|
|------------------------------------------------------------|-----------------|-------------|--------------------|

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT<br>AND CASE NUMBER                         | NATURE OF<br>PROCEEDING                       | COURT OR AGENCY<br>AND LOCATION                                                      | STATUS OR<br>DISPOSITION                           |
|------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------|
| Susan E. Kamman & Associates v. Amanda Peppas<br>11 D 2007 | Contract --<br>citation to<br>discover assets | Lake County Circuit Court<br>18 N County St<br>Waukegan, Illinois<br>Courtroom C-307 | Pending;<br>court date<br>scheduled for<br>1/21/15 |

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON FOR WHOSE<br>BENEFIT PROPERTY WAS SEIZED | DATE OF SEIZURE | DESCRIPTION AND VALUE OF<br>PROPERTY |
|---------------------------------------------------------------------|-----------------|--------------------------------------|
|---------------------------------------------------------------------|-----------------|--------------------------------------|

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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### 5. Repossessions, foreclosures and returns

- None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR OR SELLER | DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN | DESCRIPTION AND VALUE OF PROPERTY |
|----------------------------------------|------------------------------------------------------------|-----------------------------------|
|----------------------------------------|------------------------------------------------------------|-----------------------------------|

### 6. Assignments and receiverships

- None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF ASSIGNMENT OR SETTLEMENT |
|------------------------------|--------------------|-----------------------------------|
|------------------------------|--------------------|-----------------------------------|

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CUSTODIAN | NAME AND LOCATION OF COURT CASE TITLE & NUMBER | DATE OF ORDER | DESCRIPTION AND VALUE OF PROPERTY |
|-------------------------------|------------------------------------------------|---------------|-----------------------------------|
|-------------------------------|------------------------------------------------|---------------|-----------------------------------|

### 7. Gifts

- None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON OR ORGANIZATION | RELATIONSHIP TO DEBTOR, IF ANY | DATE OF GIFT | DESCRIPTION AND VALUE OF GIFT |
|--------------------------------------------|--------------------------------|--------------|-------------------------------|
|--------------------------------------------|--------------------------------|--------------|-------------------------------|

### 8. Losses

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|-----------------------------------|----------------------------------------------------------------------------------------------------------|--------------|
|-----------------------------------|----------------------------------------------------------------------------------------------------------|--------------|

### 9. Payments related to debt counseling or bankruptcy

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE                                                | DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY                                               |
|--------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Law Office of Scott C. Polman<br>8130 N Milwaukee Ave<br>Niles, IL 60714 | 9/15/14; Pamela Gieseke                             | \$1,700 total payment, inclusive of filing fee, cost of credit report, and pre/post filing courses |

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### 10. Other transfers

- None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|                                                           |             |                                                     |
|-----------------------------------------------------------|-------------|-----------------------------------------------------|
| NAME AND ADDRESS OF TRANSFEREE,<br>RELATIONSHIP TO DEBTOR | DATE        | DESCRIBE PROPERTY TRANSFERRED<br>AND VALUE RECEIVED |
| Vietnam Veteran's Organization                            | Spring 2014 | Vehicle donated; tax break; 1997 vehicle            |

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

|                                  |                           |                                                                                             |
|----------------------------------|---------------------------|---------------------------------------------------------------------------------------------|
| NAME OF TRUST OR OTHER<br>DEVICE | DATE(S) OF<br>TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND<br>VALUE OF PROPERTY OR DEBTOR'S INTEREST<br>IN PROPERTY |
|----------------------------------|---------------------------|---------------------------------------------------------------------------------------------|

### 11. Closed financial accounts

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|                                 |                                                                                        |                                       |
|---------------------------------|----------------------------------------------------------------------------------------|---------------------------------------|
| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR<br>DIGITS OF ACCOUNT NUMBER,<br>AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE<br>OR CLOSING |
|---------------------------------|----------------------------------------------------------------------------------------|---------------------------------------|

### 12. Safe deposit boxes

- None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|                                                 |                                                                     |                            |                                          |
|-------------------------------------------------|---------------------------------------------------------------------|----------------------------|------------------------------------------|
| NAME AND ADDRESS OF BANK<br>OR OTHER DEPOSITORY | NAMES AND ADDRESSES<br>OF THOSE WITH ACCESS<br>TO BOX OR DEPOSITORY | DESCRIPTION<br>OF CONTENTS | DATE OF TRANSFER OR<br>SURRENDER, IF ANY |
|-------------------------------------------------|---------------------------------------------------------------------|----------------------------|------------------------------------------|

### 13. Setoffs

- None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|                              |                |                  |
|------------------------------|----------------|------------------|
| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|

### 14. Property held for another person

- None ☒ List all property owned by another person that the debtor holds or controls.

|                           |                                   |                      |
|---------------------------|-----------------------------------|----------------------|
| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|---------------------------|-----------------------------------|----------------------|

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### 15. Prior address of debtor

- None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS  
**639 Cumnor Ave  
Barrington, IL 60010**

NAME USED  
**Amanda Peppa**

DATES OF OCCUPANCY  
**August 1994 through August  
2012**

### 16. Spouses and Former Spouses

- None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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**18 . Nature, location and name of business**

None

☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

|      | LAST FOUR DIGITS OF<br>SOCIAL-SECURITY OR<br>OTHER INDIVIDUAL<br>TAXPAYER-I.D. NO.<br>(ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND<br>ENDING DATES |
|------|------------------------------------------------------------------------------------------------------------|---------|--------------------|-------------------------------|
| NAME |                                                                                                            |         |                    |                               |

None

☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

| NAME | ADDRESS |
|------|---------|
|------|---------|

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

**19. Books, records and financial statements**

None

☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

| NAME AND ADDRESS | DATES SERVICES RENDERED |
|------------------|-------------------------|
|------------------|-------------------------|

None

☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

| NAME | ADDRESS | DATES SERVICES RENDERED |
|------|---------|-------------------------|
|------|---------|-------------------------|

None

☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

| NAME | ADDRESS |
|------|---------|
|------|---------|

None

☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

| NAME AND ADDRESS | DATE ISSUED |
|------------------|-------------|
|------------------|-------------|

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## 20. Inventories

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

| DATE OF INVENTORY | INVENTORY SUPERVISOR | DOLLAR AMOUNT OF INVENTORY<br>(Specify cost, market or other basis) |
|-------------------|----------------------|---------------------------------------------------------------------|
|-------------------|----------------------|---------------------------------------------------------------------|

- None ☐ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

| DATE OF INVENTORY | NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY<br>RECORDS |
|-------------------|---------------------------------------------------------|
|-------------------|---------------------------------------------------------|

## 21. Current Partners, Officers, Directors and Shareholders

- None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

| NAME AND ADDRESS | NATURE OF INTEREST | PERCENTAGE OF INTEREST |
|------------------|--------------------|------------------------|
|------------------|--------------------|------------------------|

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

| NAME AND ADDRESS | TITLE | NATURE AND PERCENTAGE<br>OF STOCK OWNERSHIP |
|------------------|-------|---------------------------------------------|
|------------------|-------|---------------------------------------------|

## 22. Former partners, officers, directors and shareholders

- None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

| NAME | ADDRESS | DATE OF WITHDRAWAL |
|------|---------|--------------------|
|------|---------|--------------------|

- None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

| NAME AND ADDRESS | TITLE | DATE OF TERMINATION |
|------------------|-------|---------------------|
|------------------|-------|---------------------|

## 23. Withdrawals from a partnership or distributions by a corporation

- None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

| NAME & ADDRESS<br>OF RECIPIENT,<br>RELATIONSHIP TO DEBTOR | DATE AND PURPOSE<br>OF WITHDRAWAL | AMOUNT OF MONEY<br>OR DESCRIPTION AND<br>VALUE OF PROPERTY |
|-----------------------------------------------------------|-----------------------------------|------------------------------------------------------------|
|-----------------------------------------------------------|-----------------------------------|------------------------------------------------------------|

## 24. Tax Consolidation Group.

- None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

| NAME OF PARENT CORPORATION | TAXPAYER IDENTIFICATION NUMBER (EIN) |
|----------------------------|--------------------------------------|
|----------------------------|--------------------------------------|

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**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date

1-19-15

Signature



**Amanda Peppas**  
Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*



United States Bankruptcy Court  
Northern District of Illinois

In re Amanda Peppia

Debtor(s)

Case No.

Chapter

7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

|                                                             |    |                 |
|-------------------------------------------------------------|----|-----------------|
| For legal services, I have agreed to accept .....           | \$ | <u>1,308.00</u> |
| Prior to the filing of this statement I have received ..... | \$ | <u>1,308.00</u> |
| Balance Due .....                                           | \$ | <u>0.00</u>     |

\$1,700 total payment, inclusive of filing fee, cost of credit report, and pre/post filing courses

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify): sister of debtor as stated on SOFA

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: 1/19/15

s/Scott C. Polman

**Scott C. Polman 6294565**

**Law Office of Scott C. Polman**

**8130 N Milwaukee Ave**

**Niles, IL 60714**

**(847) 292-1989 Fax: (847) 510-0581**

**spolman.law@comcast.net**

### **BANKRUPTCY RETAINER AGREEMENT AND REQUIRED NOTICES**

This contract for legal services and disclosure of required notices is made between Attorney Scott C. Polman ("Attorney"), and Amanda Peppas ("Client"). Client hereby retains Attorney for the purpose of filing a petition for bankruptcy. This contract supersedes any previous contracts or agreements and renders any and all prior contracts or agreements null and void and of no force and effect.

**PAYMENT OF ATTORNEY'S FEE AND STANDARD COSTS.** Client agrees to pay the following (subject to the Chapter 13 provision below): Client shall pay to Attorney the sum of \$1308 as Attorney's Chapter 7 Fee as a "classic retainer" which is earned when paid and non-refundable. Attorney has been paid \$1308 of said Attorney's Fee, and the remaining balance shall be paid before the filing of the Chapter 7 petition. **FULL ATTORNEY'S FEE, COURT FILING FEE, AND COSTS ARE DUE BEFORE THE CASE WILL BE FILED (SEE BELOW FOR DETAILED FEES AND COSTS).**

CHAPTER 13. If Client's case, for whatever reason, must be converted from Chapter 7 to Chapter 13 of the Bankruptcy Code, or if Attorney deems it necessary to file Chapter 13 instead of Chapter 7, then Attorney's Fee is increased from his Chapter 7 fee to his current Chapter 13 Fee, which is \$3,299 plus costs and filing fee (part of said Attorney's fee shall be paid from Client's Chapter 13 repayment plan).

**\*\*\*THE \$306 COURT FILING FEE (\$281 for Chapter 13) SHALL BE PAID ONLY AT THE FINAL SIGNATURE MEETING and MUST be payable by either money order or cash ONLY.** This \$306 payment of the court filing fee will not be accepted at any other time and Client acknowledges that there are no refunds of this \$306 after Attorney's receipt of this \$306 payment at the final signature meeting. Checks are not accepted for the filing fee. **The payment must be made in cash or money order.** The reason for this is that we will file your case electronically with the Court. At the time of filing, the funds are due to the bankruptcy court for the filing fee. The filing fee covers the cost of administering your case.

#### **Summary of Fees and Costs**

- |                                  |                                                                              |
|----------------------------------|------------------------------------------------------------------------------|
| 1. <del>\$1337</del> <u>1308</u> | Attorney's Fee (non-refundable)                                              |
| 2. <del>\$306</del> <u>335</u>   | Court Filing Fee (payable pursuant to above)***                              |
| 3. <u>\$57</u>                   | Costs of pre and post-filing courses, and credit report (all non-refundable) |

**Total Payment of \$1700 due before filing.**

**NON-STANDARD FEES AND COSTS.** In addition, and in the event that they become necessary, Client agrees to pay Attorney for non-standard fees and costs, which include, but are not limited to, the following:

1. Amendment to Schedules D, E, or F or the list of creditors – \$126
2. Any other amendments – \$100
3. Attendance at more than one Meeting of Creditors – \$175

**BANKRUPTCY ACKNOWLEDGMENTS, PROVISIONS AND REVISIONS.** Client understands that major revisions to the bankruptcy laws took effect October 17, 2005, and the precise meaning of many of the changes is yet to be determined by the courts, and no one can predict with any accuracy exactly how the law will be applied. **CLIENT UNDERSTANDS THAT BANKRUPTCY STAYS ON THEIR CREDIT RECORD FOR UP TO TEN (10) YEARS.**

1. Client acknowledges that, pursuant to new 11 U.S.C. §109(h), Client must undergo consumer credit counseling from a U.S. Trustee-approved credit counseling agency during the 180 days prior to filing. The debtor must file a certificate of completion of this pre-filing credit counseling upon filing the bankruptcy petition. See 11 U.S.C. §521(b)(1). A list of approved programs can be found on the U.S. Trustee's Web site at [www.usdoj.gov/ust/eo/bapcpa/ccde/cc\\_approved.htm](http://www.usdoj.gov/ust/eo/bapcpa/ccde/cc_approved.htm).

2. Client acknowledges being advised that bankruptcy law allows utility companies to require a deposit for continued service.
3. Client acknowledges being advised that filing bankruptcy of itself WILL NOT STOP credit union payroll deductions or electronic fund transfers from a bank account. Client must withdraw the written permission given for those deductions to stop them.
4. Client understands that ALL DEBTS MUST BE LISTED, including debts that will not be discharged, such as past due child support, student loans, taxes, Debts that you want to keep paying, Debts that you co-signed for someone else, or that someone else co-signed for you, Debts to family members and friends, Debts that you dispute, that you do not agree you owe.
5. Client understands that ALL ASSETS must be listed, you will not be able to keep an asset you do not list. This includes possible lawsuits, or worker's comp. claims that have not yet been filed by you. **FAILURE TO LIST SUCH A CLAIM MAY RESULT IN YOU NEVER BEING ABLE TO PURSUE THE CLAIM IN THE FUTURE.**
6. You are under oath in a Federal Court, filing inaccurate papers **OR FAILURE TO LIST AN ASSET can result in you not getting a discharge of your debts and POSSIBLE CRIMINAL CHARGES AGAINST YOU.**
7. Client acknowledges that student loans are not dischargeable unless the debtor can prove hardship.
8. Client understands that any credit card may be canceled as a result of filing bankruptcy.
9. Client acknowledges that Attorney has not made any promises or representations as to the ultimate outcome of this legal matter.
10. In addition to the pre-filing counseling, client acknowledges that there is also post-filing counseling requirements. Debtors filing a bankruptcy under either Chapter 7 or 13 must file a certificate with the court proving that they have completed a financial management course approved by the U.S. Trustee. 11 U.S.C. §§727(a)(11), 1328(g).  
These courses must be offered without regard to a debtor's ability to pay for the course. A list of approved programs can be found on the U.S. Trustee's Web site at [www.usdoj.gov/ust/eo/bapcpa/code/de\\_approved.htm](http://www.usdoj.gov/ust/eo/bapcpa/code/de_approved.htm).

If a debtor does not complete the course, the court can, and in many districts this has become the practice, close the debtor's case without a discharge. **CLIENT ACKNOWLEDGES THAT ATTORNEY'S REPRESENTATION OF CLIENT TERMINATES THE MOMENT THE DISCHARGE IS ISSUED.**

**RECEIVING INHERITANCE AND OTHER PROPERTY.** If you receive certain property or become a beneficiary of anyone's estate within 180 days of the date your bankruptcy petition was filed, you must tell your Attorney because the trustee must be advised within ten days through your Attorney of the nature and extent of the property you will receive.

**INCOME TAXES.** For income taxes to be discharged, it must be more than 240 days since the tax was assessed, it must be on Client's own income, for a tax year for which the return was initially due, including any extensions, more than three years before the bankruptcy petition is filed, and, the return must have actually been received by the IRS or other authority more than two years before the bankruptcy petition is filed. It is the Client's responsibility to determine the dates his/her returns were deemed filed by the IRS.

Pursuant to U. S. Treasury Department Regulation 31 CFR Part 10, section 10.35, be advised that, unless otherwise expressly indicated, any federal tax advice contained in this communication, including attachments, is not intended or written to be used, and may not be used, for the purpose of (i) avoiding penalties that may be imposed on the taxpayer and the Internal Revenue Code of 1986 as amended or (ii) promoting, marketing or recommending to another party any related matters addressed herein.

**SOURCE OF PAYMENTS.** The source of the payments made by Client to Attorney was earnings of the Debtor unless disclosed otherwise in the filed case, and Attorney has not shared or agreed to share with any other entity any compensation paid, or to be paid.

**U.S. TRUSTEE.** THE UNITED STATES TRUSTEE HAS STARTED AN AUDIT PROGRAM. IF YOUR CASE IS AUDITED, FAILURE TO PROVIDE INFORMATION REQUESTED BY THEM, OR TO OTHERWISE COOPERATE, COULD RESULT IN DENIAL OF YOUR DISCHARGE.

**CLIENT REVIEW AND DISCLOSURE.** CLIENT FURTHER REPRESENTS THAT CLIENT HAS REVIEWED ALL OF THE INFORMATION TO BE ENTERED INTO THE BANKRUPTCY SCHEDULES AND UNDERSTANDS THAT (S)HE MAY POTENTIALLY BE INCARCERATED FOR WITHHOLDING ANY INFORMATION OR PROVIDING ANY INFORMATION THAT IS INCORRECT.

**SCOPE.** Under no circumstances shall Attorney be required under this Agreement to:

- A. Represent Client in an appeal of any decision;
- B. Represent Client in a Motion for Reconsideration or modification;
- C. Represent Client in any proceedings in any other lawsuits, actions or other proceedings arising out of his/her conduct in this case, or any other case;
- D. Representation of the debtors in any dischargeability actions, relief from stay actions, or any other adversary proceeding.

**CLIENT'S COOPERATION.** Client agrees to cooperate with Attorney in the preparation of Client's case. Client agrees to obey all Court Orders, to avoid violation of any injunctions, and to refrain from unlawful conduct. Any breach of this provision shall entitle Attorney to seek to withdraw from the case.

**BAR ADMISSIONS.** Attorney, as a condition of this agreement, represents to Client that Attorney is a duly licensed Attorney at Law, licensed to appear and practice law in the state courts of Illinois and the Circuit and Bankruptcy Courts of the U.S. District Court for the Northern District of Illinois and U.S. District Court for the Eastern District of Wisconsin.

**NO GUARANTEE OF RESULTS.** Client acknowledges and understands that neither guarantees nor assurances have been made by Attorney as to the outcome of Client's matter or otherwise.

#### **DISCLOSURE OF REQUIRED NOTICES**

##### **BAPCPA REQUIRED NOTICE NO. 1 (§ 342(b)(1) and 527(a)(1) of the Bankruptcy Code) PURPOSES, BENEFITS AND COSTS OF BANKRUPTCY**

*This discussion is intended only as a brief overview of the types of bankruptcy. You should not decide whether or not to file for bankruptcy relief solely on this information. Bankruptcy law is complex, and there are many considerations that must be taken into account in making the determination whether or not to file. Anyone considering bankruptcy is encouraged to make a decision only after seeking the advice and assistance of an experienced bankruptcy attorney.*

When a person is discharged in bankruptcy, he or she is relieved from liability for most debts incurred before the bankruptcy was filed and protected from future collection of those debts. The purpose of bankruptcy is to give you a "fresh start," and the bankruptcy code is interpreted by the Courts to give effect to these words.

##### **Types of Bankruptcy**

Bankruptcy is a legal way to avoid paying people what you owe them. The Bankruptcy Code is divided into chapters. The chapters that usually apply to consumers are Chapter 7, where most or all of your debt is wiped out, and Chapter 13, which involves a repayment plan. In most cases, once you file your case, the "Automatic Stay" immediately goes into effect. The Automatic Stay means that a bankruptcy filing automatically stops, or stays, and brings to a halt most lawsuits, repossessions, foreclosures, evictions, garnishments, attachments, utility shut-offs, and debt collection harassment. Generally, creditors cannot take any further action against you or your property without permission from the Bankruptcy Court.

**Chapter 7.** Chapter 7 is designed for people who are having financial difficulties and are not able to re-pay their debts. Under the changes to the Bankruptcy Code that took effect October 17, 2005, you can usually qualify for a Chapter 7 if your average gross monthly income for the last six months is below your state's Median Income, your gross income less certain expenses is below your state's Median Income, or you can show "special circumstances" that would allow you to qualify for Chapter 7. The filing fee for a Chapter 7 is \$306.00.

Under Chapter 7, you can usually exempt, or keep, most or all of your assets under either Federal Law or Illinois Law, or, if you have not lived in Illinois for the past two years, under the state's exemption law that applies to your case. Most retirement accounts and pensions are also exempt in whole or in part. Secured property, normally your car and house, may not have any net equity, in which case you can keep them as well. The Trustee liquidates most non-exempt property and uses the proceeds to pay your creditors according to priorities of the Bankruptcy Code.

Once your Chapter 7 case is over, you receive a Discharge. The discharge prevents your creditors from taking any steps to try to collect their unsecured debt. They cannot call you, write you, sue you, or take any steps that could be considered an attempt to collect its debt. If you want to keep property that has a lien on it, you must keep your payments current, and may be required to reaffirm your debt. Some debts can not be discharged. Typical examples are child support, alimony, and other domestic support obligations, some taxes, student loans, criminal restitution, and debts for death or personal injury caused by operating vehicles while intoxicated with alcohol or drugs.

**Chapter 13.** Chapter 13 is a valuable tool that lets you catch up overdue mortgage or car payments, taxes and domestic support obligations. It also applies where you have the ability to repay some or all of your debts over time. You must have less than \$307,675 in unsecured debt (such as credit cards and doctor's bills) and less than \$922,975 in secured debt (such as mortgages and car loans) to qualify for Chapter 13. The filing fee for a Chapter 13 is \$281.00. Under Chapter 13, you keep all of your property, both exempt and non-exempt, as long as you resume making your regular payments on secured debt and keep current under the repayment plan that you propose. In certain circumstances it may be possible to reduce a car payment. A repayment plan can last for up to five years. After finishing your payments, most of your unsecured debts are discharged.

**Chapter 11.** Chapter 11 is designed primarily for business reorganization, but is also available to consumer debtors. Its provisions are quite complex. In the vast majority of cases, Chapter 11 is unnecessary and too expensive for most consumer debtors. The filing fee for Chapter 11 is \$1,039.00.

**Chapter 12.** Chapter 12 lets family farmers repay their debts over a period of time, and is in many ways similar to a Chapter 13. The filing fee for a Chapter 12 is \$239.00.

**Credit Counseling.** Reputable credit counselors can advise you on managing your money and your debts. They may also be able to develop a plan to repay your debts. Unfortunately, many credit counselors are not reputable and charge high fees and contributions that will cause you to fall deeper into debt and damage your credit rating. Furthermore, many misrepresent their non-profit status and/or their affiliations with religious or charitable organizations, and are little more than collection agents for the credit card companies.

Under the changes to the Bankruptcy Code that took effect October 17, 2005, you are required to take two short credit counseling courses, one before you file bankruptcy, and one after you have filed. We will refer you to a reputable credit counselor who has been approved by the United States Trustee Department for these courses.

**BAPCA REQUIRED NOTICE NO. 2 (§ 527(a)(2) of the Bankruptcy Code) NOTICE OF MANDATORY DISCLOSURE TO CONSUMERS WHO CONTEMPLATE FILING BANKRUPTCY**

*Please Note: The following documents, disclosures, and notices are required by legislation adopted by Congress in 2005, after intense lobbying by the credit industry. Some practitioners believe they are designed to scare and intimidate good people who have had bad things happen to them and need debt relief. Some also believe that the following required Notices are based on the false assumption that all people who consider bankruptcy relief are dishonest. Please rest assured — so long as you are honest and meet the requirements set out under the law, you are entitled to debt relief. I can guide you through all the requirements of filing for bankruptcy, so long as you provide accurate and complete information.*

**General Instructions:**

1. All information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful.
2. All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in 11 U.S.C. §506 must be stated in those documents where requested after reasonable inquiry to establish such value.
3. Current monthly income, the amounts specified in 11 U.S.C. §707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with 11 U.S.C. §707(b)(2)) are required to be stated after reasonable inquiry.
4. Information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

**Instructions on Providing Information Required by Bankruptcy Law:**

You are required to provide certain information to the court when you file bankruptcy. It is my obligation to make diligent inquiry of you so as to obtain information to include in your bankruptcy petition. I will be asking you for information concerning the following areas and possibly others. There will be additional information and possibly documents we will need you to bring back at your next appointment. I will give you a list of the documents I will need at your first appointment. I will need at least the following information to help you with your case:

**Valuation of Assets:** You need to value your assets based on the replacement value of the property as of the date your case is filed without deducting the costs of sale or marketing. If the property was acquired for personal, family, or household purposes, replacement value shall mean the price a retail merchant would charge for property of that kind considering the age and condition of the property (at the time value is determined). If you are uncertain of the value of your property, you should inform your attorney/paralegal and then contact a merchant who sells property of that kind and inquire as to the price that merchant would charge.

**Determination of Current Monthly Income:** In order to determine your income for purposes of your bankruptcy, you will need to provide some evidence about any source of income you or your spouse received in the preceding six months. Evidence of income may include pay stubs, statements from your employer, bank statements, or a letter from your employer. If you have other proof of income, please bring it to your next appointment. Also, if you or your spouse's income has changed in the last six months, you need to bring this to the attention of your attorney.

**Types of Debt That Must Be Listed and Disclosed:** You must list all your debts, including but not limited to (a) debts you don't believe you should owe; (b) debts that will not be discharged, such as student loans and child support; (c) debts that you intend to pay; (d) debts that you cosigned for someone else or that someone else cosigned for you; and (e) debts to family members.

Amount of Non-Priority Unsecured Debt: You will need to know the amount of your non-priority unsecured debt. This is debt that does not have any collateral securing it and is generally not in the nature of taxes, alimony, maintenance, or support. If you do not know the amount of your debt, you can get this information from your bills, court documents, or a credit report or from contacting your creditors directly.

Amount of Debt Owed to Secured and Priority Creditors: You will need to list all creditors who have any claim on any of your property as collateral for the debt. You will also need to list all creditors to whom you owe taxes, alimony, maintenance, child support, divorce decree obligations, etc. If you do not have this information, then you may be able to obtain it from your bills, a credit report, or court documents or from contacting your creditors directly.

Amount of Your Regular Monthly Expenses (Not Including Your Debts): You will need to be able to tell your attorney the amount you spend on your utilities, food, insurance premiums, expenses incurred to protect your family under the Family Violence Prevention and Services Act (or other applicable federal law), medical expenses, 401k contributions, and loan payments, donations for charity, payments for the care of family members, and any school expenses for a dependent child. In addition, if you have any extraordinary expenses that are reasonable and necessary, please list these as well.

How To Determine What Address Should Be Used for Each Creditor: If a creditor is still communicating with you, I will need the address supplied by the creditor in at least 2 communications over the last 90 days. Do not use the address to which you send payments; rather, use the correspondence address. Keep all mailings from your creditor, so we can keep up with any changes in the creditor's address and prove, if necessary, that we used the appropriate addresses.

**BAPCPA REQUIRED NOTICE NO. 3 (§ 342(b)(2) of the Bankruptcy Code)  
FRAUD & CONCEALMENT PROHIBITED**

If you decide to file bankruptcy, it is important that you understand the following:

1. Some or all of the information you provide in connection with your bankruptcy will be filed with the bankruptcy court on forms or documents that you will be required to sign and declare as true under penalty of perjury.
2. A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection with a bankruptcy case shall be subject to fine, imprisonment, or both.
3. All information you provide in connection with your bankruptcy case is subject to examination by the Attorney General.

**BAPCPA REQUIRED NOTICE NO. 4 (§ 527(b) of the Bankruptcy Code)**

*Please Note: The following documents, disclosures, and notices are required by legislation adopted by Congress in 2005, after intense lobbying by the credit industry. Some practitioners believe they are designed to scare and intimidate good people who have had bad things happen to them and need debt relief. Some also believe that the following required Notices are based on the false assumption that all people who consider bankruptcy relief are dishonest. Please rest assured — so long as you are honest and meet the requirements set out under the law, you are entitled to debt relief. I can guide you through all the requirements of filing for bankruptcy, so long as you provide accurate and complete information.*

**IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES  
FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER:**

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine. An attorney can help guide you through this intricate process, making it easier and less stressful for you.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of creditors where you will be questioned by a court official called a "trustee" and, much more rarely, by creditors.


If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts. It may not be in your best interest to reaffirm a debt.

If you choose to file a Chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your Chapter 13 plan and with the confirmation hearing on your plan which, if held, will be before a bankruptcy judge.

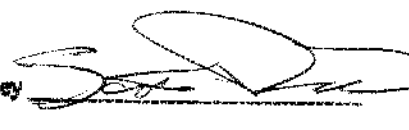
If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you will want to find out what should be done from someone familiar with that type of relief. However, please be advised that in most cases, you will only be concerned with Chapter 7 and Chapter 13.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.

**ACKNOWLEDGMENT OF CONTRACT AND DISCLOSURE OF REQUIRED NOTICES.** The foregoing contract is hereby accepted by Client and Attorney, and Client acknowledges having read and understood each and every of the 7 pages of the foregoing contract and having received a signed copy of this Contract. Client further acknowledges having accepted, read, and understood all of the foregoing notices.

Client  Dated 9-29-14

Client \_\_\_\_\_ Dated \_\_\_\_\_

Attorney  Dated 1/19/15



**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

#### Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### **Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### **3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re Amanda Peppia

Debtor(s)

Case No.

Chapter

7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)**  
**UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Amanda Peppia

Printed Name(s) of Debtor(s)

X

Signature of Debtor

Date

Case No. (if known)

X

Signature of Joint Debtor (if any)

Date

**Instructions:** Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Amanda Peppia** Debtor(s) Case No. \_\_\_\_\_  
Chapter **7**

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: **11**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date:

**1-19-15**

  
\_\_\_\_\_

**Amanda Peppia**  
Signature of Debtor

Advocate Good Shepherd Hospital  
450 West Hwy 22  
Barrington, IL 60010

Cadence Health  
25 N Winfield Rd  
Winfield, IL 60190

Derick Dermatology  
1531 South Grove Ave  
Suite 101  
Barrington, IL 60010

HealthLab  
25 North Winfield Rd  
Winfield, IL 60190

LDC Collect  
POB 52110  
Phoenix, AZ 85072

Med Business Bureau  
POB 1219  
Park Ridge, IL 60068

Nationwide Credit Collection  
815 Commerce Dr  
Suite 270  
Oak Brook, IL 60523-8852

Northwest Community Hospital  
25709 Network Place  
Chicago, IL 60673

Novas Dohr & Coll OB/GYN Assoc SC  
600 Hart Road  
Suite 310  
Barrington, IL 60010

Nys Higher Ed Services  
99 Washington Ave  
Albany, NY 12210

Slm Financial Corp  
POB 9500  
Wilkes-barre, PA 18773

Susan E Kamman & Associates  
33 E Main St  
Lake Zurich, IL 60047

Unique National Collection  
119 E Maple St  
Jeffersonville, IN 47130